PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450
or Fax
(571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where

indicated unless correcte maintenance fee notifical	ed below or directed oth tions.	nerwise in Block 1, by (a) specifying a new co	orresi	oondence address;	and/or	(b) indicating a sepa	trate "F	EE ADDRESS" for	
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)					Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.					
909 7590 07/17/2008 PILLSBURY WINTHROP SHAW PITTMAN, LLP P.O. BOX 10500 MCLEAN, VA 22102					Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmital is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.					
									(Signature)	
			į						(Date)	
APPLICATION NO.	APPLICATION NO. FILING DATE		FIRST NAMED INVEN		R ATTORNEY DOCKET NO.		RNEY DOCKET NO.	CONFIRMATION NO.		
10/720,752 TITLE OF INVENTION	11/25/2003 : LITHOGRAPHIC INT		Emiel Jozef Melanie Eu EM	issen			1468-0306993		2765	
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DI	UE	PREV. PAID ISSUE	E FEE	TOTAL FEE(S) DUE	1	DATE DUE	
nonprovisional	NO	\$1440	\$300		\$0	,	\$1740		10/17/2008	
EXAM	EXAMINER		CLASS-SUBCLASS							
TURNER, SAMUEL A		2877	356-500000							
1. Change of corresponde CFR 1.363). Change of corresponded correspon	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered patent attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. 1 PILLSBURY WINTHROP 2 SHAW PITTMAN LLP 3									
3. ASSIGNEE NAME AT PLEASE NOTE: Unle recordation as set forth (A) NAME OF ASSIG ASML NETHER	ess an assignee is identi i in 37 CFR 3.11. Comp INEE	A TO BE PRINTED ON T fied below, no assignee detion of this form is NO	data will appear on the	e pat an as	ent. If an assigne ssignment. and STATE OR C	OUNTI		ocument	has been filed for	
Please check the appropriate assignee category or categories (will not be printed on the patent):										
4a. The following fee(s) a Issue Fee Publication Fee (No. Advance Order - #	b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 033975 (enclose an extra copy of this form).									
	SMALL ENTITY statu	s. See 37 CFR 1.27.	b. Applicant is no							
NOTE: The Issue Fee and interest as shown by the re	Publication Fee (if requeecords of the United State	ired) will not be accepted as Patent and Trademark	d from anyone other that Office.	un the	e applicant; a regis	stered at	ttorney or agent; or th	e assign	ee or other party in	
Authorized Signature	Date September 23, 2008									
Typed or printed name	Christophe	F. Lair		Registration No. 54,248						
This collection of informa an application. Confident submitting the completed this form and/or suggestic Box 1450, Alexandria, Vi Alexandria, Virginia 2231 Under the Paperwork Red	application form to the ons for reducing this bur reginia 22313-1450. DO 3-1450.	USPTO. Time will vary den, should be sent to the NOT SEND FEES OR (depending upon the in e Chief Information Of COMPLETED FORMS	divid ficer TO	fual case. Any con , U.S. Patent and T THIS ADDRESS:	mments Fradema . SEND	on the amount of tin ark Office, U.S. Depa TO: Commissioner f	ne you nertment of or Paten	require to complete of Commerce, P.O. ats, P.O. Box 1450,	